



Town of Mashpee

Board of Health
16 Great Neck Road North
Mashpee, Massachusetts 02649
(508) 539-1426

TOWN OF MASHPEE

APPLICATION TO MAINTAIN AND OPERATE RECREATIONAL CAMPS, CAMP GROUNDS, OVERNIGHT CABINS, MOTELS OR TRAILER COACH PARKS

Application is hereby made for a license to operate a Recreational Camp, a Camp Ground, Overnight Cabins, a Motel, or a Trailer Coach Park as covered by Chapter 140 of the General Laws, as amended by the Acts of 1956 and/or later amendments.

Date: _____

Organization/Person To Whom License Should Be Issued: _____

Type of: Establishment:

☐ Recreational Camp, ☐ Camp Ground, ☐ Overnight Cabins, ☐ Motel, ☐ Trailer Coach Park

Name of Establishment: _____

Location of Establishment: _____

Establishment mailing address (in season): _____

Establishment mailing address (off season): _____

Director/Manager: _____

Social Security Number or Federal ID: _____

Email Address: _____

Maximum capacity:

Recreational Camp: _____ (number of guests)

Camp Ground: _____ (number of camp sites)

Overnight Cabins: _____ (number of units) _____ (total capacity of guests)

Motel: _____ (number of units) _____ (total capacity of guests)

Trailer Coach Park: _____ (number of trailer sites)

Facilities provided: ☐ Swimming pool: ☐ Restaurant/lounge: ☐ Other: _____

Method of refuse disposal/removal: _____

Method of sewage disposal: _____

Opening date: _____ **Closing Date (seasonal):** _____

Signature of applicant: _____